UTILITY PATENT APPLICATION

TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 1931\00003

First Named Inventor or Application Identifier

Ho Yun SO

METHOD OF CONTROLLING OPERATION OF ANIMAL TRAINING

Title

		Label No.									
	APPLICATION E	Assistant Commissioner for Patents ADDRESS TO: Box Applications Washington, DC 20231									
	Filing Fee as calculated to Specification (preferred arrangement set - Descriptive title of the - Cross References to Reference to Microfiche - Background of the Inverse - Brief Summary of the in - Brief Description of the - Detailed Description - Claim(s) - Abstract of the Disclos	26 J	6. Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies								
	4. Oath or Declaration a. Newly executed (original bull of the continuation of the completed) DELETION OF I Signed statement inventor(s) name see 37 CFR 1.6 Incorporation By Reference checked) The entire disc	ACCOMPANYING APPLICATION PARTS 8. Assignment Papers (cover sheet & document(s)) 9. 37 CFR 3.73(b) Statement Power of Attorney 10. English Translation Document (if applicable) 11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 12. Preliminary Amendment 13. (Should be specifically itemized) 14. Small Entity Statement filed in prior application, Statement(s) Statement filed in prior application, Statement filed in prior application, Statement filed in prior application,									
	declaration is supplied un as being part of the discl application and is hereby therein.	16. Other:									
	17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: □ Continuation □ Divisional □ Continuation-in-part (CIP) of prior application No/										
	18. CORRESPONDENCE ADDRESS										
	☐ Customer Number or Bar Code t	₹9000000000000000000000000000000000000	or 🗵 Correspondence address below								
	NAME -	Pollock, Vande Sande & Amernick, R.L.L.P.									
4	ADDRESS	Suite 800									
ţ	ADURESS			1990	0 M Street, N.W.						
,	CITY	Washington	STA	TE	DC	ZIP CODE	20036-3425				
	COUNTRY	U.S.A	TELEP	IONE (202) 331-7111	FAX	(202) 293-6229				

Fee Calculation and Transmittal

\$0 \$0 \$0 \$760

			2	1,						
	(Col 1)		(Col 2) (Col 3)			s	SMALL ENTITY		NON-SMALL ENTITY	
	NO. FILED			NO. EXTRA		RATE	FEE	OR	RATE	FEE
TOTAL	6	minus	20	= 0		x9=	\$		x18=	\$0
INDEP	1	minus	3	= 0		x39=	\$		x78=	\$0
First Presentation, Multiple Dependent Claims +130=						\$		+260=	\$0	
Base Filing Fee						\$380			\$760	
Other Fee (specify purpose)					\$			\$		
TOTAL FILING FEE* (accounting for possible small entity status)					\$380	OR	TOTAL	\$		

X	A che	eck in the amount of <u>\$ 380.00</u> to cover the filing fee is enclosed
	No pa	ayment is enclosed at this time. Full payment will be made when the executed Declaration is submitted.
X		Commissioner is hereby authorized to charge and credit Deposit Account No. 22-0185 as described below. A duplicate copy is sheet is enclosed.
		Charge the amount of as filing fee
	X	Credit any overpayment.
	X	Charge any additional filing fees required under 37 CFR § 1.16 and 1.17
		Charge the Issue Fee set in 37 CFR § 1.18 at the mailing of the Notice of Allowance, pursuant to 37 CFR § 1.311(b)

Name (Print/Type)	Martin Abramson	Registration No. (Attorn	25,787	
Signature	Mati Alramson		Date	1/18/99